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20999 7590 05/24/2004

FROMMER LAWRENCE & HAUG
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Anne-Marie C. Upon Reg. No. 52,390	(Depositor's name)
Anne-Marie C. Upon	(Signature)
8/24/04	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/701,014	11/22/2000	Kyriacos A. Mitrphanous	550 184	4760

TITLE OF INVENTION: RETROVIRAL DELIVERY SYSTEM

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$665	\$0	\$665	08/24/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
GUZO, DAVID	1636	424-093200

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **Thomas J. Kowalski**
 2 **Frommer Lawrence & Haug, LLP**
 3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Oxford Biomedica (UK) Limited**Oxford, Great Britain**Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies **10**

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(Authorized Signature)

(Date)

Anne-Marie C. Upon Reg. No. 52,390 8/24/04**08/26/2004 AADDF02 00000004 09701014****01 FC:2501****02 FC:8001****665.00 DP
30.00 DP**

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